

CIA INTERNAL USE ONLY

SECRET

(When Filled In)

PERSONALITY (201) FILE REQUEST											
TO RI/ANALYSIS SECTION				DATE 26 Nov 58		ACTION <input checked="" type="checkbox"/> OPEN <input type="checkbox"/> AMEND <input type="checkbox"/> CLOSE					
FROM R.I.D./201				ROOM NO. 1040 K		TELEPHONE 2027					
INSTRUCTIONS: Form must be typed or printed in block letters.											
SECTION I: List 201 number, name and identifying data in the spaces provided. All known aliases and variants (including maiden name, if applicable) must be listed. If the identifying data varies with the alias used, a separate form must be used. Write UNKNOWN for items you are unable to complete.											
SECTION II: List cryptonym or pseudonym, if assigned. If true name is sensitive, obtain 201 number from 201 Control Desk and complete Section I and Section III. On a separate form, enter the 201 number and complete Section II and Section III. Submit each form separately.											
SECTION III: To be completed in all cases.											
SECTION I											
SENSITIVE <input type="checkbox"/>				1. SOURCE DOCUMENT							
NON-SENSITIVE <input checked="" type="checkbox"/>											
NAME (Last) (First) (Middle) (Title)				SEX		3.					
BRAITENBERG, BENNO				DR		<input checked="" type="checkbox"/> M <input type="checkbox"/> F					
NAME VARIANT											
TYPE NAME 2. (Last) (First) (Middle) (Title)											
A				BRAITENBERG-ZENNENBERG, BENNO V.							
PHOTO 4. BIRTH DATE 5. COUNTRY OF BIRTH 6. CITY OR TOWN OF BIRTH 7. OTHER IDENTIFICATION 8.											
YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>				29 Nov 96		ITAL		BOLZANO		1. U.S. 2. 3.	
OCCUPATION/POSITION								OCC/POS. CODE 9.			
								IF			
SECTION II											
CRYPTONYM				PSEUDONYM							
SECTION III											
COUNTRY OF RESIDENCE 10. AUST				ACTION DESK 11. EE/G/L		2ND COUNTRY INTEREST 12.		3RD COUNTRY INTEREST 12A.			
COMMENTS: CIT: Austria											
201-											
PERMANENT CHANGE				RESTRICTED FILE		SI					
YES <input type="checkbox"/> NO <input type="checkbox"/>				YES <input type="checkbox"/> NO <input type="checkbox"/>		<input checked="" type="checkbox"/>					

FORM NO. 831 USE PREVIOUS EDITIONS.
1 OCT 56SECRET
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RECORDED 1301

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SOURCE/METHOD/EXEMPTION 3B2B
NAZI WAR CRIMES DISCLOSURE ACT
DATE 2006

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